

RECEIPT # _____

There must be a minimum of 8 participants to have the clinic and a maximum 12 registrations will be accepted.

**TROY RECREATION DEPARTMENT'S
2005 HOCKEY GOALIE CLINIC
JUNE 24 AND 25, 2005
FRIDAY – 6:00 P.M. – 9:00 P.M.
SATURDAY, 8:00 A.M.-4:00 P.M.**

(SEE ATTACHED FORM FOR CLINIC SCHEDULE)

Player's Name _____

Address _____
(street) (city) (zip)

E-Mail Address _____

Birthdate _____ (Age 6-18) Age _____

Name of School _____ Grade next Fall _____

Name of parent/guardian _____

Address _____ Phone _____

Hockey experience _____

EMERGENCY CALL _____ Phone _____

Are you allergic to any medication? _____

Doctor's Name _____

NOTE: LUNCH WILL BE PROVIDED ON SATURDAY.

MANDATORY EQUIPMENT to participate: Complete goalie equipment required.

WAIVER AND RELEASE

We, the undersigned, being the parents/guardians of _____, being fully aware of the dangers inherent to the sport of hockey, in consideration of the City of Troy, Hobart Arena, Troy Recreation Department, and its agents and servants, do give permission for our child to participate in the Hockey Goalie Clinic. We do hereby expressly waive any and all claims and rights of whatever nature, which may arise against the City of Troy, Hobart Arena, Troy Recreation Department, Recreation Director, the supervisory staff and instructors of the Hockey Goalie Clinic, or their agents or servants, as a result of injuries incurred by our child while participating in the Hockey Goalie Clinic.

Date _____

Signature _____

REGISTRATION FEE:

_____ **\$90.00**

Refund Policy: The Department will make program refunds only for the Following:

1. If the program is cancelled by the department.
2. If the registered participant moves out of town before the program begins.
3. If the registered participant becomes ill before the program starts and furnishes a Doctor's statement indicating such.

2005 TROY RECREATION DEPARTMENT

HOCKEY GOALIE CLINIC

HOBART ARENA

WHEN:	Friday, June 24	6:00-6:30 p.m.	Classroom
		6:30-6:45 p.m.	Dry Land
		7:00-9:00 p.m.	On Ice
	Saturday, June 25	8:00-9:00 a.m.	Classroom
		9:00-9:45 a.m.	Dry Land
		10:00-12:00 p.m.	On Ice
		Lunch Break	
		1:00-1:45 p.m.	Classroom
		1:45-2:15 p.m.	Dry Land
		2:30-4:00 p.m.	On Ice

CLINIC INCLUDES: **5½ HOURS OF ICE TIME**

PROFESSIONAL INSTRUCTION

CLASSROOM & DRY LAND TRAINING

GOAL: The goal of the clinic is to not only teach important fundamentals to the players but to give them drills and practice techniques that they can take with them and work on throughout the season.

ON ICE TRAINING:

Basic fundamentals

Stance & Styles

Types of Saves

Use of Sticks

Controlling Rebounds

Angles

Video

PLAYING THE GAME:

Breakaway & Dekes

Wrap Around

Team Play

Game Situations 1 on 1 & 2 on 1

Puck Handling

KEY: Focus on skating, mobility, and movement

INSTRUCTOR: Head instructor is Rick Szabo. Rick is currently head coach of the Troy High School Team. Rick played Junior A hockey in Canada prior to playing professionally for 10 years. Rick played in the AHL, IHL, & ECHL as part of the Cincinnati Stingers and Toronto Maple Leaf organizations.